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Title: Full Round 1 Results Table

Description: Full results from round 1 of the Delphi survey

<b>Question No.</b>	<b>Statement</b>	<b>Score 1-3</b>	<b>% of N</b>	<b>Score 4-6</b>	<b>% of N</b>	<b>Score 7-9</b>	<b>% of N</b>	<b>Decision</b>
<b>1</b>	Potential harms that are not very serious do not need to be emphasized.	<b>53</b>	<b>23.14</b>	<b>62</b>	<b>27.07</b>	<b>114</b>	<b>49.78</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	18	33.69	11	20.76	24	45.27	No consensus
	<i>Ethics committee member etc.</i>	5	13.89	11	30.56	20	55.56	No consensus
	<i>Industry (inc. medico-legal expert)</i>	2	9.52	6	28.57	14	61.91	No consensus
	<i>Applied researcher</i>	5	20.84	7	29.17	12	50	No consensus
	<i>Clinical trial professionals</i>	21	26.92	20	25.64	37	47.44	No consensus
	<i>Other</i>	2	10	6	30	12	60	No consensus
<b>2</b>	Potentially serious harms need to be emphasized, even if they are very rare.	<b>188</b>	<b>81.73</b>	<b>35</b>	<b>15.21</b>	<b>5</b>	<b>3.03</b>	<b>Consensus</b>
	<i>Public, Patient and their advocate</i>	45	84.91	4	13.21	1	1.89	Consensus
	<i>Ethics committee member etc.</i>	29	80.55	6	16.67	1	2.78	Consensus
	<i>Industry (inc. medico-legal expert)</i>	16	76.19	2	9.52	3	14.28	Consensus
	<i>Applied researcher</i>	19	79.16	4	16.67	1	4.17	Consensus
	<i>Clinical trial professionals</i>	63	79.75	14	17.72	2	2.54	Consensus
	<i>Other</i>	18	90	2	10	0	0	Consensus
<b>3</b>	Potential benefits and harms of a clinical trial need to be compared with what happens if the participant does not take part in the trial.	<b>184</b>	<b>80.35</b>	<b>34</b>	<b>14.85</b>	<b>11</b>	<b>3.93</b>	<b>Consensus</b>
	<i>Public, Patient and their advocate</i>	45	84.91	7	13.21	1	1.89	Consensus

	<i>Ethics committee member etc.</i>	31	86.11	1	2.78	4	11.12	Consensus
	<i>Industry (inc. medico-legal expert)</i>	19	90.48	2	9.52	0	0	Consensus
	<i>Applied researcher</i>	19	79.16	4	16.67	1	4.17	Consensus
	<i>Clinical trial professionals</i>	59	74.23	15	19.23	4	5.12	Consensus
	<i>Other</i>	15	75	4	20	1	5	Consensus
4	It is okay to use 'positive framing' when describing how severe harms can be.	90	39.3	72	31.44	67	29.26	No consensus
	<i>Public, Patient and their advocate</i>	24	45.28	18	33.97	11	20.76	No consensus
	<i>Ethics committee member etc.</i>	8	22.22	13	36.11	15	41.68	No consensus
	<i>Industry (inc. medico-legal expert)</i>	8	38.1	4	19.05	9	24.85	No consensus
	<i>Applied researcher</i>	10	41.67	7	29.16	7	29.16	No consensus
	<i>Clinical trial professionals</i>	31	40.01	28	35.9	19	24.35	No consensus
	<i>Other</i>	9	45	3	15	8	40	No consensus
5	Benefits are never completely certain, so they should not be described.	8	3.49	45	19.65	176	76.85	Consensus
	<i>Public, Patient and their advocate</i>	4	7.54	12	22.64	37	69.81	No consensus
	<i>Ethics committee member etc.</i>	2	5.71	7	20	26	74.28	Consensus
	<i>Industry (inc. medico-legal expert)</i>	0	0	4	19.04	17	80.96	Consensus
	<i>Applied researcher</i>	1	4.17	4	16.67	19	79.17	Consensus
	<i>Clinical trial professionals</i>	2	2.60	13	16.89	62	80.51	Consensus
	<i>Other</i>	0	0	4	20	16	80	Consensus
6	Potential benefits should be described more fully than potential harms.	15	6.58	54	23.69	159	69.74	No consensus
	<i>Public, Patient and their advocate</i>	5	9.62	18	34.61	29	65.4	No consensus
	<i>Ethics committee member etc.</i>	1	2.86	5	14.29	29	82.86	Consensus

	<i>Industry (inc. medico-legal expert)</i>	0	0	1	4.76	20	96.24	Consensus
	<i>Applied researcher</i>	0	0	6	25	18	75	Consensus
	<i>Clinical trial professionals</i>	4	5.2	18	28.57	55	71.43	Consensus
	<i>Other</i>	2	10	7	35	11	55	No consensus
7	The most likely potential benefits should be described.	188	82.1	34	14.84	7	3.06	Consensus
	<i>Public, Patient and their advocate</i>	45	84.9	7	13.2	1	1.89	Consensus
	<i>Ethics committee member etc.</i>	28	80	7	20	0	0	Consensus
	<i>Industry (inc. medico-legal expert)</i>	18	85.71	2	9.52	1	4.76	Consensus
	<i>Applied researcher</i>	21	87.5	2	8.34	1	4.17	Consensus
	<i>Clinical trial professionals</i>	64	83.12	12	15.58	1	1.30	Consensus
	<i>Other</i>	11	55	7	35	2	10	No consensus
8	Any likely benefits to the participant (including embryos, foetus, nursing infants) should be described.	181	79.13	46	20.07	2	0.87	Consensus
	<i>Public, Patient and their advocate</i>	42	79.25	11	20.75	0	0	Consensus
	<i>Ethics committee member etc.</i>	28	80	7	20	0	0	Consensus
	<i>Industry (inc. medico-legal expert)</i>	15	71.44	5	23.8	1	4.76	Consensus
	<i>Applied researcher</i>	20	83.34	4	16.67	0	0	Consensus
	<i>Clinical trial professionals</i>	61	79.23	14	18.18	2	2.60	Consensus
	<i>Other</i>	13	65	7	35	0	0	No consensus
9	General potential benefits (such as ‘the medicine may help you and your cancer’) should be described.	146	64.04	63	27.63	19	8.33	No consensus
	<i>Public, Patient and their advocate</i>	33	63.46	15	28.85	4	7.69	No consensus
	<i>Ethics committee member etc.</i>	21	60	12	34.29	2	5.71	No consensus
	<i>Industry (inc. medico-legal expert)</i>	14	76.18	3	14.28	2	9.52	Consensus
	<i>Applied researcher</i>	12	49.99	9	37.5	3	12.5	No consensus
	<i>Clinical trial professionals</i>	51	66.23	20	25.96	6	7.79	No consensus
	<i>Other</i>	11	55	6	30	3	15	No consensus

10	Concrete, specific potential benefits (such as ‘this medicine is designed to enable you to walk farther before becoming breathless’) should be described.	194	70.18	24	10.53	10	4.38	Consensus
	<i>Public, Patient and their advocate</i>	47	90.39	3	5.77	2	3.85	Consensus
	<i>Ethics committee member etc.</i>	26	74.28	7	20	2	5.71	Consensus
	<i>Industry (inc. medico-legal expert)</i>	13	61.91	6	28.57	2	9.52	No consensus
	<i>Applied researcher</i>	24	95.83	1	4.17	0	0	Consensus
	<i>Clinical trial professionals</i>	67	87.02	6	7.79	4	5.20	Consensus
	<i>Other</i>	18	90	2	10	0	0	Consensus
11	Only the most important potential benefits should be described. If too many are included the reader might become confused. A complete list can be contained in an appendix or online.	113	33.63	77	33.63	39	17.03	No consensus
	<i>Public, Patient and their advocate</i>	21	39.62	15	28.3	17	32.08	No consensus
	<i>Ethics committee member etc.</i>	16	45.71	14	40	5	14.28	No consensus
	<i>Industry (inc. medico-legal expert)</i>	13	61.91	3	14.28	5	23.81	No consensus
	<i>Applied researcher</i>	12	50.01	10	41.67	2	8.34	No consensus
	<i>Clinical trial professionals</i>	39	50.65	28	36.36	10	12.99	No consensus
	<i>Other</i>	12	60	6	30	2	10	No consensus
12	Participants should not be told about potential harms.	13	5.72	3	1.32	211	92.95	Consensus
	<i>Public, Patient and their advocate</i>	4	7.84	1	1.96	46	90.19	Consensus
	<i>Ethics committee member etc.</i>	2	5.88	0	0	32	94.12	Consensus
	<i>Industry (inc. medico-legal expert)</i>	1	5	0	0	19	95	Consensus
	<i>Applied researcher</i>	0	0	0	0	24	100	Consensus
	<i>Clinical trial professionals</i>	5	6.58	0	0	71	93.43	Consensus
	<i>Other</i>	0	0	2	10	18	90	Consensus

13	Potential harms should be described more fully than potential trial benefits.	42	18.42	74	32.45	112	49.12	No consensus
	<i>Public, Patient and their advocate</i>	10	19.23	19	36.54	23	44.23	No consensus
	<i>Ethics committee member etc.</i>	10	29.41	7	20.58	17	49.99	No consensus
	<i>Industry (inc. medico-legal expert)</i>	6	30	5	25	9	45	No consensus
	<i>Applied researcher</i>	3	12.5	10	41.66	11	45.84	No consensus
	<i>Clinical trial professionals</i>	9	11.85	27	35.52	40	52.63	No consensus
	<i>Other</i>	4	20	7	35	9	45	No consensus
14	Only the most common possible harms should be mentioned. This will focus the reader's attention and minimize overload.	35	15.32	80	35.09	134	58.77	No consensus
	<i>Public, Patient and their advocate</i>	9	17.31	12	23.09	31	59.62	No consensus
	<i>Ethics committee member etc.</i>	5	14.7	5	14.7	24	70.59	Consensus
	<i>Industry (inc. medico-legal expert)</i>	2	10	6	30	12	60	No consensus
	<i>Applied researcher</i>	2	8.33	3	12.5	19	79.17	Consensus
	<i>Clinical trial professionals</i>	13	17.11	26	34.22	37	48.68	No consensus
	<i>Other</i>	2	10	9	45	9	45	No consensus
15	The harms should be separated into serious (life threatening, causing permanent damage) and less serious (like a mild headache that goes away quickly).	195	85.53	25	10.96	8	3.51	Consensus
	<i>Public, Patient and their advocate</i>	39	80.78	7	13.46	3	5.76	Consensus
	<i>Ethics committee member etc.</i>	32	94.12	2	5.88	0	0	Consensus
	<i>Industry (inc. medico-legal expert)</i>	18	90	1	5	1	5	Consensus
	<i>Applied researcher</i>	22	91.66	1	4.17	1	4.17	Consensus
	<i>Clinical trial professionals</i>	64	84.21	10	13.16	2	2.64	Consensus
	<i>Other</i>	15	75	4	20	1	5	Consensus
16	Not all potential harms are known, especially for new treatments that have not been studied extensively. Participants need	207	90.79	19	8.33	2	0.88	Consensus

	to know that not all potential harms can be listed.							
	<i>Public, Patient and their advocate</i>	48	88.46	6	11.54	0	0	Consensus
	<i>Ethics committee member etc.</i>	32	94.12	2	5.88	0	0	Consensus
	<i>Industry (inc. medico-legal expert)</i>	20	100	0	0	0	0	Consensus
	<i>Applied researcher</i>	23	95.83	1	4.17	0	0	Consensus
	<i>Clinical trial professionals</i>	67	88.16	9	11.84	0	0	Consensus
	<i>Other</i>	17	85	1	5	2	10	Consensus
17	Sometimes harms are discovered after the trial begins. As soon as they are discovered, participants need to be told about them.	<b>208</b>	<b>91.63</b>	<b>18</b>	<b>7.93</b>	<b>1</b>	<b>0.44</b>	<b>Consensus</b>
	<i>Public, Patient and their advocate</i>	48	94.11	3	5.88	0	0	Consensus
	<i>Ethics committee member etc.</i>	31	91.18	3	8.82	0	0	Consensus
	<i>Industry (inc. medico-legal expert)</i>	19	90	2	10	0	0	Consensus
	<i>Applied researcher</i>	22	91.66	1	4.17	1	4.17	Consensus
	<i>Clinical trial professionals</i>	71	93.43	5	6.58	0	0	Consensus
	<i>Other</i>	17	85	3	15	0	0	Consensus
18	Risks to conceiving/fathering a child, pregnancy, or breastfeeding should be emphasized.	<b>197</b>	<b>86.78</b>	<b>28</b>	<b>12.34</b>	<b>6</b>	<b>2.64</b>	<b>Consensus</b>
	<i>Public, Patient and their advocate</i>	42	82.35	7	15.68	1	1.96	Consensus
	<i>Ethics committee member etc.</i>	32	94.12	2	5.88	0	0	Consensus
	<i>Industry (inc. medico-legal expert)</i>	17	85	3	15	0	0	Consensus
	<i>Applied researcher</i>	19	79.17	5	20.83	0	0	Consensus
	<i>Clinical trial professionals</i>	69	90.8	6	7.89	1	1.32	Consensus
	<i>Other</i>	17	85	3	15	0	0	Consensus
19	It's okay to use 'positive framing'. That is, it is okay to say 'this treatment is safe for 90% of the people who take it' instead of 'this	<b>45.37</b>	<b>103</b>	<b>74</b>	<b>32.6</b>	<b>50</b>	<b>9.69</b>	<b>No consensus</b>

	treatment causes side effects for 10% of the people who take it’.							
	<i>Public, Patient and their advocate</i>	29	56.87	11	21.56	11	21.56	No consensus
	<i>Ethics committee member etc.</i>	10	29.41	16	47.06	8	23.53	No consensus
	<i>Industry (inc. medico-legal expert)</i>	8	40	5	25	7	35	No consensus
	<i>Applied researcher</i>	13	54.16	7	29.17	4	16.67	No consensus
	<i>Clinical trial professionals</i>	37	48.68	25	32.89	14	18.42	No consensus
	<i>Other</i>	7	35	8	40	5	25	No consensus
20	Potential harms should be described in pictures as well as words.	<b>74</b>	<b>32.74</b>	<b>114</b>	<b>50.44</b>	<b>38</b>	<b>16.82</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	25	49.01	21	41.17	4	9.8	No consensus
	<i>Ethics committee member etc.</i>	6	18.18	22	66.67	5	15.15	No consensus
	<i>Industry (inc. medico-legal expert)</i>	8	40	5	25	7	35	No consensus
	<i>Applied researcher</i>	8	33.34	10	41.67	6	25	No consensus
	<i>Clinical trial professionals</i>	15	19.73	48	63.17	13	17.11	No consensus
	<i>Other</i>	9	45	8	40	3	15	No consensus
21	Potential trial harms should be described in such a way that they can be compared to what would happen if participant did not take part in the trial.	<b>175</b>	<b>77.09</b>	<b>41</b>	<b>18.06</b>	<b>11</b>	<b>4.84</b>	<b>Consensus</b>
	<i>Public, Patient and their advocate</i>	44	86.28	6	11.76	1	1.96	Consensus
	<i>Ethics committee member etc.</i>	26	76.48	7	20.58	1	2.94	Consensus
	<i>Industry (inc. medico-legal expert)</i>	15	75	4	20	1	5	Consensus
	<i>Applied researcher</i>	21	87.5	2	8.33	1	4.17	Consensus
	<i>Clinical trial professionals</i>	50	65.79	19	25	7	9.21	No consensus
	<i>Other</i>	15	75	4	20	1	5	Consensus
22	Potential benefits should be described after harms.	<b>27</b>	<b>11.84</b>	<b>119</b>	<b>52.19</b>	<b>82</b>	<b>35.96</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	8	15.96	18	35.29	25	49.01	No consensus
	<i>Ethics committee member etc.</i>	7	21.21	21	63.63	5	15.15	No consensus

	<i>Industry (inc. medico-legal expert)</i>	5	25	8	40	7	35	No consensus
	<i>Applied researcher</i>	1	4.17	11	45.83	12	50	No consensus
	<i>Clinical trial professionals</i>	4	5.41	48	64.87	22		No consensus
	<i>Other</i>	2	10	12	60	6	30	No consensus
23	Potential benefits and harms should be beside each other (for example in two columns).	<b>97</b>	<b>42.74</b>	<b>92</b>	<b>40.53</b>	<b>38</b>	<b>16.73</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	31	62	11	22	8	16	No consensus
	<i>Ethics committee member etc.</i>	7	21.21	18	54.54	8	24.24	No consensus
	<i>Industry (inc. medico-legal expert)</i>	6	30	6	30	8	40	No consensus
	<i>Applied researcher</i>	12	49.99	9	37.49	3	12.5	No consensus
	<i>Clinical trial professionals</i>	28	37.84	38	51.35	8	10.81	No consensus
	<i>Other</i>	9	54	8	40	3	20	No consensus
24	Information about potential benefits or harms should be presented apart by one or more pages.	<b>12</b>	<b>5.31</b>	<b>81</b>	<b>35.83</b>	<b>133</b>	<b>58.85</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	7	14	14	28	29	58	No consensus
	<i>Ethics committee member etc.</i>	0	0	15	45.45	18	54.54	No consensus
	<i>Industry (inc. medico-legal expert)</i>	1	5	7	35	12	60	No consensus
	<i>Applied researcher</i>	1	4.17	3	12.5	20	83.34	Consensus
	<i>Clinical trial professionals</i>	2	2.74	31	42.47	40	54.8	No consensus
	<i>Other</i>	0	0	8	40	12	60	No consensus
25	Information about potential benefits and harms should be mentioned in more than one place in the leaflet.	<b>24</b>	<b>10.61</b>	<b>91</b>	<b>40.27</b>	<b>111</b>	<b>49.11</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	7	14	20	40	23	46	No consensus
	<i>Ethics committee member etc.</i>	3	9.09	19	57.57	11	33.33	No consensus
	<i>Industry (inc. medico-legal expert)</i>	0	0	8	40	12	60	No consensus
	<i>Applied researcher</i>	1	4.17	10	41.67	13	54.17	No consensus



	<i>Clinical trial professionals</i>	4	5.4	27	36.48	43	58.11	No consensus
	<i>Other</i>	6	31.58	6	31.58	7	36.84	No consensus
26	A complete (detailed) description of the potential harms (and the likelihood of each harm) should be provided in a table in an appendix.	<b>114</b>	<b>50.22</b>	<b>90</b>	<b>39.65</b>	<b>23</b>	<b>10.13</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	30	60	19	38	1	2	No consensus
	<i>Ethics committee member etc.</i>	16	48.48	14	42.42	3	9.09	No consensus
	<i>Industry (inc. medico-legal expert)</i>	9	45	6	30	5	25	No consensus
	<i>Applied researcher</i>	16	66.67	5	20.84	3	12.5	No consensus
	<i>Clinical trial professionals</i>	27	36.49	48	51.35	9	12.16	No consensus
	<i>Other</i>	13	65	6	30	1	5	No consensus
27	Drug fact boxes (see below) divide harms into serious and non-serious. This way of presenting harms is helpful.	<b>124</b>	<b>55.11</b>	<b>55</b>	<b>24.45</b>	<b>46</b>	<b>20.45</b>	<b>No consensus</b>
	<i>Public, Patient and their advocate</i>	26	53.06	12	24.49	11	22.45	No consensus
	<i>Ethics committee member etc.</i>	18	54.54	7	21.21	8	24.24	No consensus
	<i>Industry (inc. medico-legal expert)</i>	10	50	6	30	4	20	No consensus
	<i>Applied researcher</i>	18	75	3	12.5	3	12.5	Consensus
	<i>Clinical trial professionals</i>	39	52.7	18	24.33	17	22.97	No consensus
	<i>Other</i>	9	47.36	7	36.84	3	15.79	No consensus